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C O N F I D E N T I A L SECTION 01 OF 02 MINSK 000285

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TAGS: [KHIV](#) [EAID](#) [SOCI](#) [PGOV](#) [BO](#)
SUBJECT: GOB'S FLEXIBLE APPROACH TO TACKLING HIV/AIDS

REF: A. 06 MINSK 720

[1](#)B. 06 MINSK 152

Classified By: Ambassador Karen Stewart for reason 1.4 (d).

Summary

[1](#)1. (C) Belarus has been fairly successful in fighting HIV/AIDS. Our contacts expect the rate of new infections to continue to decline; TB co-infection continues to be a key problem. The GOB also seems committed to treating those living with HIV/AIDS, and seems to appreciate the role of NGOs in the fight against the disease. Unfortunately, as elsewhere, the huge social stigma associated with HIV/AIDS likely prevents a significant proportion of those at risk from getting tested. End summary.

Official Statistics on HIV/AIDS Prevention Encouraging

[1](#)2. (SBU) As of January 2007, 7,747 Belarusians, or less than 0.1 percent of the total population, live with HIV/AIDS according to official statistics. (Note: The actual infection rate is likely somewhere between 0.1-0.5 percent. End note.) The rate of infection slowed in 2005 and 2006. Deputy Minister of Health Mikhail Rimzha expects the infection rate to slow even further in the years to come. He noted that the 15-19 year-old age category used to account for nearly a quarter of new infections, but in 2006 it made up just three percent of new cases. He believes this shows recent prevention efforts in Belarus are succeeding. The greater proportion of older victims results from the fact people who actually contracted HIV years ago are only now getting tested, according to Rimzha.

Prevention Efforts Target All Risk Groups

[1](#)3. (SBU) Rimzha said educational programs target intravenous drug users, men having sex with men, and prostitutes. Admitting these groups were hard for the government to reach directly, Rimzha noted the important role played by NGOs. NGO-run prevention programs distribute free condoms and syringes on an anonymous basis. Rimzha noted the Orthodox Church helped promote being faithful within marriage. Rimzha said teaching abstinence in Belarus was unrealistic and would turn off youth from AIDS education.

[1](#)4. (SBU) As HIV/AIDS first appeared in Belarus 20 years ago, the majority of persons living with HIV/AIDS are now over 30 years old. Rimzha told us 97 percent of HIV positive pregnant women receive treatment in time to prevent

transmission to the fetus. The other three percent are living on the margins of society and did not seek prenatal care.

¶5. (SBU) When asked about HIV/AIDS and TB co-infection, Rimzha agreed it was a serious problem. He said many Belarusians living with HIV/AIDS died of TB before succumbing to AIDS. Belarus submitted an application to the Global Fund for AIDS, TB and Malaria to combat TB, including HIV/TB co-infection. The project was approved preliminarily (for USD 14.8 million over five years), and Rimzha said he expected it would be signed shortly.

Testing and Treatment

¶6. (SBU) The Ministry of Health cannot conduct anonymous testing for HIV/AIDS, but Rimzha holds that people understand doctors will maintain confidentiality. He did not see a need for a means for anonymous testing. The availability of treatment should provide some incentive for testing. Rimzha claimed anti-retroviral drug treatment (ART) was available to all those who need it. With the assistance of the Global Fund(ref A), the GOB spent USD 1.84 million on ART. Currently almost 700 patients are receiving treatment.

Belarus Not Ready for a "Slavic Magic Johnson"

¶7. (SBU) Still, HIV/AIDS carries a heavy stigma. When asked whether prominent Belarusians acknowledging they lived with HIV/AIDS would promote awareness, Rimzha said people in Belarus did not talk about such things. He did note that some HIV positive volunteers working with NGOs might speak of

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their status to clients. Despite the stigma, HIV/AIDS does receive more public attention than it used to as demonstrated by a parliamentary hearing on HIV/AIDS for World AIDS Day in ¶2006.

Comment: What You Don't Know Could Kill You

¶8. (C) While statistics demonstrate Belarus' progress in the fight against HIV/AIDS, there is ample room to doubt the problem is as mild as the official data suggest. As Rimzha admitted, the average young Belarusian is not abstinent. The high incidence of heavy drinking (ref B) means even many Belarusians with an awareness of HIV/AIDS prevention might not always exercise the judgment necessary to practice safe sex. We are skeptical of Rimzha's assertion that most Belarusians trust doctors will maintain confidentiality if they take an HIV/AIDS test. However, given the level of homophobia in Belarus and the government's constant emphasis on law and order, it is refreshing that the GOB willingly works with NGOs reaching out to those most at risk of contracting HIV/AIDS. We were also encouraged to learn Rimzha understands the importance of fighting TB as part of preventing the spread of HIV/AIDS.

Moore